PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

US018198

CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE			OR	OTHER THAN		
TOTAL CLAIMS	19)			RATE	FEE		RATE	FEE	
FOR	NUMBER FILED	NUMB	R EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS	/ 9 minus 20	D= * Ø	* Ø		X\$ 9=	,	OR	X\$18=		
INDEPENDENT CLAIMS	3 minus 3	s = * Ø	* Ø		X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2				ļ	TOTAL		OR	, J	<i>440</i>	
CLAIMS AS AMENDED - PART II							JOI1	OTHER	6 6 1 5 3 3 3 1 2 1	
(Column 1)		olumn 2)	(Column 3)		SMALLE	ENTITY	OR,	SMALLI	ENTITY	
CLAIMS REMAINING AFTER AMENDMENT Independent * Independent *	,PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE: 2	
MON Total & *	Minus 🖖 🗱	2000年			-×x\$19≜ ⁴		ŎŔ	X\$18≡	4	
	Minus ∜ ⊚ k++		₹*** ;		X42===		OR	X84 <u>=</u>		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					140≝.		OR.	* =		
			437		TOTAL		OR OR	TOTAL		
(Column 2) (Column 3)					ADDIT FEE			ADDIT FEE	Est his arrival and	
CLAIMS REMAINING AFTER AMENDMENT Total Independent	PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI: TIONAL FEE		RATE	TESTS TO THE TESTS	
Total 3	Minus **				X\$.9= ;		OR	^X\$18=#		
Independent &	Minus				X42=		IOR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				J "	140			+280=	***	
					+140≡ TOTAL		OR	19 7 11 1 West Ser	1.60	
		· (1)	. *		ODIT. FEE		OR.	TOTAL ADDIT FEE		
(Column 1)		olumn 2) IIGHEST	(Column 3)	1 -					199	
REMAINING AFTER AMENDMENT Total Independent	PR	NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus **		=	\prod	X\$ 9=		OR	X\$18=		
Independent *	Minus ***		=	┇	X42=		OR	X84=		
FIRST PRESENTATION OF M	ULTIPLE DEPEND	ENT CLAIM		┛ ┞	+140=		OR	+280=		
* If the entry in column 1 is less than t	he entry in column 2,	write "0" in col	umn 3.	L	TOTAL		^ D	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										